PERSONAL F	-INANCIAL STATEWENT	COVER SHEET
	ordance with chapter 572 of the Government Code.	PAGE # Page 1 of 42
	2014, covering calendar year ending December 31, 2013 . S - INSTRUCTION GUIDE when completing this form.	ACCOUNT # 36668
1 NAME	TITLE, FIRST, MI	OFFICE USE ONLY
	David NICKNAME, LAST, SUFFIX Dewhurst	Date Received RECEIVED JAN 212014 MX
2 ADDRESS	Office of Lt. Governor 1200 Congress Ave.Room 2E, 13 Austin, TX 78701	Texas Ethics Commission Receipt # (FO)PM \ / 21 Amount Legal
	(CHECK IF FILER'S HOME ADDRESS)	Date Processed PROCESSED JAN 2 1 2014
3 TELEPHONE NUMBER	AREA CODE NUMBER; EXTENSION	Date Imaged
4 REASON FOR FILING STATEMENT	☐ CANDIDATE	(INDICATE OFFICE)
	APPOINTED OFFICER	
	EXECUTIVE HEAD	(INDICATE AGENCY)
	☐ FORMER OR RETIRED JUDGE SITTING BY ASSIGNMEN	Т
	☐ STATE PARTY CHAIR	(INDICATE PARTY)
	OTHER	(INDICATE POSITION)
5 Family members who spouse or dependent	ose financial activity you are reporting (filer must report information about the children if the filer had actual control over that activity):	out the financial activity of the filer's
SPOUSE	Patricia H. Dewhurst	
DEPENDENT CHILD	1.	
	2	
	3.	
In parts 1 through 18, yo required to disclose not over that person's finance	ou will disclose your financial activity during the calendar year. In part only your own financial activity, but also that of your spouse or a depecial activity.	s 1 through 14, you are endent child if you had actual control
4	COPY AND ATTACH ADDITIONAL PAGES AS NEC	CESSARY R: 600762

Tayaa Ethiaa Oananiaalan	D O Day 40070	Augstin Tayon 70744 2070	(512)463-5800	1-800-325-850
Texas Ethics Commission	P.O. Box 12070	Austin, Texas 78711-2070	(512)403-3000	1-000-323-030

SOURCES OF OCC	UPATIONAL I	NCOME	PA	ART 1A
☐ NOT APPLICABLE				
When reporting information abou providing the number under whic	t a dependent child's a h the child is listed on	nctivity, indicate the child the Cover Sheet.	about whom you are reporting by	
1 INFORMATION RELATES TO	☑ FILER	☐ SPOUSE	☐ DEPENDENT CHILD	
2 EMPLOYMENT	1		MPLOYER / POSITION HELD	WWW
▼ EMPLOYED BY ANOTHER	State of Texas - Of State Capitol 1200 Congress Av Austin, TX 78701	☐ (Check if Filer	s nome Address)	
SELF-EMPLOYED		NATURE OF	OCCUPATION	
	DV AND ATTACLE	DDITIONAL DACES A	0 NEOE00 A DV	

exas Ethics Commission	n P.O. Box 120	70 Austin, Texas 7	8711-2070	(512)463-	-5800	1-800-32	5-850
STOCK						PART	2
☐ NOT APPLICA	ABLE						
List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFSINSTRUCTION GUIDE.							
When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.							
BUSINESS ENTITY Falcon Seaboard Diversified, Inc. NAME							
2 STOCK HELD O	R ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	.D		
NUMBER OF SH	IARES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	1,000	ГО 4,999	
F SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,00	0OR MOI	RE
BUSINESS ENTI	TY	NAME David Dewhurst Investment - I, Inc.					
STOCK HELD O	R ACQUIRED BY	X FILER	FILER SPOUSE DEPENDENT CHILD				
NUMBER OF SH	IARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	X 1,000	ГО 4,999	
IF SOLD	☐ NET GAIN☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,00	0OR MOI	RE

BONDS, NOTES & OTHER COMMERCIAL PAPER PART 3 ■ NOT APPLICABLE List all bonds, notes and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. DESCRIPTION Promissory Note - J.W.Wood OF INSTRUMENT ² HELD OR ACQUIRED BY X FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____ 3 IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ■ NET GAIN ☐ NET LOSS DESCRIPTION Promissory Note - Falcon Seaboard Diversified, Inc. OF INSTRUMENT HELD OR ACQUIRED BY X FILER ☐ SPOUSE DEPENDENT CHILD _____ IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ■ NET GAIN ☐ NET LOSS DESCRIPTION Promissory Note - Dewhurst For Texas OF INSTRUMENT HELD OR ACQUIRED BY DEPENDENT CHILD _____ X FILER SPOUSE IF SOLD ■ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE ☐ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Austin, Texas 78711-2070

BONDS, NOTES &	OTHER COMMER	CIAL PAPE	R PART 3	
List all bonds, notes and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFSINSTRUCTION GUIDE				
When reporting information abo providing the number under whi	•		about whom you are reporting by	
¹ DESCRIPTION OF INSTRUMENT	Bruce Gibson Note			
² HELD OR ACQUIRED BY				
	X FILER	SPOUSE	DEPENDENT CHILD	
³ IF SOLD				
☐ NET GAIN ☐ NET LOSS	☐ LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE	
DESCRIPTION OF INSTRUMENT	Christopher Dewhurst Note			
HELD OR ACQUIRED BY	☑ FILER	SPOUSE	☐ DEPENDENT CHILD	
IF SOLD ☐ NET GAIN ☑ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	X \$10,000 - \$24,999 \$25,000OR MORE	
DESCRIPTION OF INSTRUMENT	Don Nevins Notes	Ans America		
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	55,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

BONDS, NOTES &	OTHER COMMER	CIAL PAPE	R PART 3		
☐ NOT APPLICABLE			2000 A TO THE TOTAL THE TO		
1	the category of the amount of		pouse, or a dependent child during the realized from the sale. For more		
When reporting information abo providing the number under whi			about whom you are reporting by		
1 DESCRIPTION OF INSTRUMENT	Promissory Note - Buddy Ba	Promissory Note - Buddy Barfield			
² HELD OR ACQUIRED BY					
	X FILER	SPOUSE	DEPENDENT CHILD		
³ IF SOLD					
☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE		
DESCRIPTION OF INSTRUMENT	Promissory Note - Gene & L	inda Dewhurst			
HELD OR ACQUIRED BY					
	☑ FILER	SPOUSE	DEPENDENT CHILD		
IF SOLD					
☐ NET GAIN ☑ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🔀 \$25,000OR MORE		
DESCRIPTION OF INSTRUMENT	Promissory Note - David De	whurst Foundation			
HELD OR ACQUIRED BY					
	∑ FILER	SPOUSE	DEPENDENT CHILD		
IF SOLD					
☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE		
CODY AND ATTACH ADDITIONAL DAGES AS NECESSARY					

BONDS, NOTES &	OTHER COMMER	CIAL PAPE	R	PART 3	
NOT APPLICABLE					
List all bonds, notes and other calendar year. If sold, indicate to information, see FORM PFSIN	he category of the amount of				
When reporting information about providing the number under which			about whom you are reporting by	y	
¹ DESCRIPTION OF INSTRUMENT	Promissory Note - David De	whurst Committee			
² HELD OR ACQUIRED BY					
		SPOUSE	DEPENDENT CHILD		
³ IF SOLD					
☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,00	00OR MORE	
	DPY AND ATTACH ADDITI	ONAL DACES AS	NECESSARY		

MUTUAL FUNDS NOT APPLICABLE				PART 4
List each mutual fund and the number acquired during the calendar year a some or all of the shares of a muture from the sale. For more information When reporting information about a providing the number under which the	and indicate the category of al fund were sold, also ind n, see FORM PFSINSTR a dependent child's activity	of the number of sha icate the category o CUCTION GUIDE , indicate the child a	res of mutual funds h f the amount of the ne	eld or acquired. If et gain or loss realized
¹ MUTUAL FUND	NAME Goldman Sachs High Yield Muni Mutual Fund Class I			
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	_D
³ NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 5,000 TO 9,999	X 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
MUTUAL FUND	American Funds - Investr		ME	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
MUTUAL FUND	American Funds - Growtl		ME	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	☐ \$25,000OR MORE
COPY	Y AND ATTACH ADDITI	ONAL PAGES AS	NECESSARY	

				PART	4
ind indicate the category o al fund were sold, also indi n, see FORM PFSINSTR i dependent child's activity,	of the number of sha icate the category of CUCTION GUIDE , indicate the child a	res of mutual funds h f the amount of the ne	eld or acqu et gain or lo	ıired. If oss realiz	:ed
American Funds - Washir					
X FILER	SPOUSE	DEPENDENT CHIL	D		
☐ LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	1,000	ГО 4,999	
LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,00	0OR MO	RE
		. 11 k. 11 m 12m			
	ind indicate the category of all fund were sold, also indicate the category of all fund were sold, also indicate the child in the PSINSTR dependent child's activity he child is listed on the Control American Funds - Washing FILER LESS THAN 100 S 5,000 TO 9,999	ind indicate the category of the number of shat all fund were sold, also indicate the category of in, see FORM PFSINSTRUCTION GUIDE dependent child's activity, indicate the child a he child is listed on the Cover Sheet. NA American Funds - Washington Mutual Investm X FILER SPOUSE LESS THAN 100 100 TO 499 S 5,000 TO 9,999 10,000 OR MORE	ind indicate the category of the number of shares of mutual funds heal fund were sold, also indicate the category of the amount of the near, see FORM PFSINSTRUCTION GUIDE dependent child's activity, indicate the child about whom you are respectively. Indicate the category of the amount of the near section of the category of the amount of the near section. Indicate the category of the number of shares of mutual funds heal funds heal funds heal funds heal funds. Indicate the category of the number of shares of mutual funds heal fu	Indicate the category of the number of shares of mutual funds held or acqual fund were sold, also indicate the category of the amount of the net gain or lon, see FORM PFSINSTRUCTION GUIDE dependent child's activity, indicate the child about whom you are reporting by the child is listed on the Cover Sheet. NAME American Funds - Washington Mutual Investment Fund - A IN FILER SPOUSE DEPENDENT CHILD LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 999 10,000 OR MORE	per of shares in that mutual fund that you, your spouse, or a dependent child held or and indicate the category of the number of shares of mutual funds held or acquired. If all fund were sold, also indicate the category of the amount of the net gain or loss realized, see FORM PFS—INSTRUCTION GUIDE dependent child's activity, indicate the child about whom you are reporting by the child is listed on the Cover Sheet. NAME

Austin, Texas 78711-2070

INCOME FROM INT	EREST, DIVIDEN	IDS, ROYAL	TIES & RENTS PART 5	
☐ NOT APPLICABLE				
	I rents during the calendar y		ccess of \$500 that was derived from category of the amount of the income. For	
When reporting information about providing the number under which			about whom you are reporting by	
¹ SOURCE OF INCOME	NAME AND ADDRESS Falcon Seaboard Investment Company, L.P.			
	109 NORTH POST OAK L SUITE 540 HOUSTON, TX 77024	ANE		
² RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD	
³ AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🗵 \$25,000OR MORE	
SOURCE OF INCOME		NAME AND AD	DRESS	
	TransOil Marketing, Inc.			
	P.O. Box 6697 Abilene, TX 79608			
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	X \$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	
SOURCE OF INCOME		NAME AND AD	DRESS	
	Silver Point Capital Fund, I	L.P.		
	Two Greenwich Plaza Greenwich, CT 06830			
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	X \$500 - \$4,999	55,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

INCOME FROM INT ☐ NOT APPLICABLE	EREST, DIVIDEN	DS, ROYAL	TIES & RENTS PART 5		
List each source of income you,	rents during the calendar ye		cess of \$500 that was derived from category of the amount of the income. For		
When reporting information about providing the number under which			bout whom you are reporting by		
1 SOURCE OF INCOME	NAME AND ADDRESS Goldman, Sachs KMI Investors, L.P.				
	200 West Street New York, NY 10282				
² RECEIVED BY	☑ FILER	SPOUSE	DEPENDENT CHILD		
³ AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE		
SOURCE OF INCOME		NAME AND AD	DRESS		
OCCUPATION OF THE OCCUPATION O	Carribbean Real Estate Opp	portunity Fund 2005, I	L.P.		
	200 West Street New York, NY 10282				
RECEIVED BY	☑ FILER	SPOUSE	DEPENDENT CHILD		
AMOUNT	X \$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE		
SOURCE OF INCOME		NAME AND AD	DRESS		
OCCINCE OF INCOME	David Dewhurst Investment	Partnership, Ltd.			
	109 North Post Oak Lane Suite 540 Houston, TX 77024				
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD		
AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$25,000OR MORE		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

INCOME FROM INT ☐ NOT APPLICABLE	EREST, DIVIDEN	DS, ROYAL	TIES & RENTS PART 5
	rents during the calendar ye		cess of \$500 that was derived from category of the amount of the income. For
When reporting information about providing the number under which			bout whom you are reporting by
¹ SOURCE OF INCOME	FSI Management, LLC 109 North Post Oak Lane	NAME AND ADD	DRESS
	Suite 540 Houston, TX 77024		
² RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD
³ AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🛛 \$25,000OR MORE
SOURCE OF INCOME		NAME AND AD	DRESS
	Evergreen Charitable Rema	ainder Unitrust	
	109 North Post Oak Lane Suite 540 Houston, TX 77024		
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD
AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🗵 \$25,000OR MORE
SOURCE OF INCOME		NAME AND AD	DRESS
SSORGE OF INCOME	David Dewhurst Investment	t - I, Inc.	
	109 North Post Oak Lane Suite 540 Houston, TX 77024		
RECEIVED BY	☑ FILER	SPOUSE	DEPENDENT CHILD
AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🔀 \$25,000OR MORE
		IONAL BACES AS	NECESSADV

INCOME FROM IN I ☐ NOT APPLICABLE	EREST, DIVIDEN	DS, ROYAL	HES & RENIS PART 5
•	rents during the calendar ye		ccess of \$500 that was derived from category of the amount of the income. For
When reporting information about providing the number under which			about whom you are reporting by
1 SOURCE OF INCOME	D IID II II	NAME AND AD	DRESS
	David Dewhurst Trust 109 North Post Oak Lane Suite 540 Houston, TX 77024		
² RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD
³ AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$25,000OR MORE
SOURCE OF INCOME		NAME AND AD	DRESS
	Buddy Barfield		
	1606 Watchhill Road Austin, TX 78703		
RECEIVED BY	☑ FILER	SPOUSE	DEPENDENT CHILD
AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE
SOURCE OF INCOME		NAME AND AD	DRESS
	Don Nevins		
	10011 Sunderland Street Santa Ana, CA 92705		
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD
AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE
CC	PY AND ATTACH ADDIT	IONAL PAGES AS	NECESSARY

P.O. Box 12070

INCOME FROM INT	EREST, DIVIDE	NDS, ROYAL	TIES & RENTS PART 5
☐ NOT APPLICABLE			
•	rents during the calendar y	ear and indicate the o	cess of \$500 that was derived from category of the amount of the income. For
When reporting information about providing the number under which			about whom you are reporting by
¹ SOURCE OF INCOME	J.W. Wood	NAME AND AD	DRESS
	17460 IH35 Schertz, TX 78154		
² RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD
³ AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE
SOURCE OF INCOME		NAME AND AD	
	Goldman, Sachs Distresse	ed Opportunities Fund	IV, L.P.
	200 West Street New York, NY 10282		
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD
AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	X \$10,000 - \$24,999 ☐ \$25,000OR MORE
SOURCE OF INCOME		NAME AND AD	DRESS
	GS Capital Partners V		
	200 West Street New York, NY 10282		
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD
AMOUNT	X \$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE
CC	PY AND ATTACH ADDI	TIONAL PAGES AS	NECESSARY

P.O. Box 12070

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070

PERSONAL NOTES	AND LEASE AC	KEEMEN I S	PARIO
Identify each guarantor of a loan a a dependent child had a total finar agreement at any time during the tion, see FORM PFSINSTRUCTI When reporting information about providing the number under which	ncial liability of more than calendar year and indicato ION GUIDE a dependent child's activi	\$1,000 in the form of a the category of the a ty, indicate the child a	a personal note or notes or lease amount of the liability. For more informa-
¹ PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Bank Of America, 300 (Convent, San Antonio,	TX 78205
² LIABILITY OF		SPOUSE	DEPENDENT CHILD
³ GUARANTOR			
4 AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🗵 \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Falcon Seaboard Diver	rsified, Inc.	
LIABILITY OF	☐ FILER	SPOUSE	DEPENDENT CHILD
GUARANTOR		4	And the second s
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🔀 \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Patricia Hamilton 1995	Investment Trust	
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD
GUARANTOR			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🔀 \$25,000OR MORE
COF	Y AND ATTACH ADDI	TIONAL PAGES AS	S NECESSARY

Texas Ethics Commission

PERSONAL NOTES	AND LEASE AC	REEMENTS		PART 6
☐ NOT APPLICABLE				
Identify each guarantor of a loan a a dependent child had a total finant agreement at any time during the ction, see FORM PFS-INSTRUCTI When reporting information about providing the number under which	icial liability of more than s calendar year and indicate ION GUIDE a dependent child's activit	\$1,000 in the form of the category of the a ty, indicate the child a	a personal note or notes or lea amount of the liability. For mo	re informa-
¹ PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Land Rover Houston			
² LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD	
³ GUARANTOR				
4 AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$25,	000OR MORE
COF	PY AND ATTACH ADDI	TIONAL PAGES AS	NECESSARY	

Austin, Texas 78711-2070

PART 7B INTERESTS IN BUSINESS ENTITIES □ NOT APPLICABLE Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. ¹ HELD OR ACQUIRED BY ☐ DEPENDENT CHILD X FILER ☐ SPOUSE NAME AND ADDRESS ² DESCRIPTION (check if Filer's Home Address) Golf Associates, Ltd. 512 East Blanco Road Suite 100 Boerne, TX 78006 3 IF SOLD ☐ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS HELD OR ACQUIRED BY X FILER SPOUSE ■ DEPENDENT CHILD NAME AND ADDRESS DESCRIPTION (check if Filer's Home Address) Golf Associates Group, Ltd. P.O. Box 1109 Carefree, AZ 95377 IF SOLD ■ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE ■ NET LOSS HELD OR ACQUIRED BY X FILER ☐ SPOUSE ☐ DEPENDENT CHILD NAME AND ADDRESS **DESCRIPTION** (check if Filer's Home Address) Falcon Seaboard Diversified, Inc. 109 North Post Oak Lane Suite 540 Houston, TX 77024 IF SOLD ■ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Austin, Texas 78711-2070

PART 7B INTERESTS IN BUSINESS ENTITIES □ NOT APPLICABLE Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. ¹ HELD OR ACQUIRED BY DEPENDENT CHILD X FILER ☐ SPOUSE NAME AND ADDRESS 2 DESCRIPTION (check if Filer's Home Address) Falcon Seaboard Investment Co., L.P. 109 North Post Oak Lane Suite 540 Houston, TX 77024 3 IF SOLD ■ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS HELD OR ACQUIRED BY ☐ DEPENDENT CHILD _____ X FILER ☐ SPOUSE NAME AND ADDRESS **DESCRIPTION** (check if Filer's Home Address) GS Capital Partners V 200 West Street New York, NY 10282 IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET GAIN ☐ NET LOSS HELD OR ACQUIRED BY SPOUSE ☐ DEPENDENT CHILD X FILER NAME AND ADDRESS DESCRIPTION (check if Filer's Home Address) Goldman Sachs KMI Investors, L.P. 200 West Street New York, NY 10282 IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE □ NET GAIN ☐ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUS	SINESS ENTITIES			PART /B
☐ NOT APPLICABLE		10.1000		
Describe all beneficial interests calendar year. If the interest wa For an explanation of beneficial INSTRUCTION GUIDE	as sold, also indicate the cated interest' and other specific di	gory of the amount or rections for complet	of the net gain or loss real ing this section, see FOR	ized from the sale. M PFS
When reporting information abo providing the number under whi	ut a dependent child's activity ch the child is listed on the Co	, indicate the child a over Sheet.	about whom you are repor	ting by
¹ HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
² DESCRIPTION		NAME AND (check if Filer's	ADDRESS Home Address)	
	David Dewhurst Investment	Partnership, Ltd.		
	109 North Post Oak Lane Suite 540 Houston, TX 77024			
3 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	S10,000 - \$24,999 \Bigsim	\$25,000OR MORE
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION		NAME AND (check if Filer's	ADDRESS s Home Address)	
	Trilantic Capital Partners IV	, L.P.		
	399 Park Avenue New York, NY 10022			
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 	\$25,000OR MORE
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION			ADDRESS s Home Address)	
	Goldman Sachs Distressed	Opportunities Fund	IV, L.P.	
	200 West Street New York, NY 10282			·
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$1 0,0 00 - \$24,999] \$25,000OR MORE
	OPY AND ATTACH ADDIT	IONAL PAGES AS	SNECESSARY	

Austin, Texas 78711-2070

PART 7B INTERESTS IN BUSINESS ENTITIES ☐ NOT APPLICABLE Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. ¹ HELD OR ACQUIRED BY □ DEPENDENT CHILD _ X FILER SPOUSE NAME AND ADDRESS ² DESCRIPTION (check if Filer's Home Address) Carribbean Real Estate Opportunity Fund 2005, L.P. 200 West Street New York, NY 10282 3 IF SOLD ■ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS HELD OR ACQUIRED BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD NAME AND ADDRESS DESCRIPTION (check if Filer's Home Address) Archon Core Plus Real Estate Fund 2005, L.P. 200 West Street New York, NY 10282 IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ■ NET GAIN ☐ NET LOSS HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD NAME AND ADDRESS **DESCRIPTION** (check if Filer's Home Address) Silver Point Capital Fund, L.P. Two Greenwich Plaza Greenwich, CT 06830 IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000-OR MORE ■ NET GAIN ☐ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUS	INESS ENTITIES		PA	RT /B
☐ NOT APPLICABLE				78.A.V.
calendar year. If the interest was	s sold, also indicate the categ	ory of the amount of	spouse, or a dependent child during the net gain or loss realized from ing this section, see FORM PFS	ng the the sale.
When reporting information about providing the number under which			bout whom you are reporting by	
¹ HELD OR ACQUIRED BY	∏ FILER	SPOUSE	DEPENDENT CHILD	
² DESCRIPTION	Taconic Opportunity Fund, L		ADDRESS Home Address)	
	450 Park Avenue New York, NY 10022			
3 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000	OR MORE
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION		NAME AND (check if Filer's	ADDRESS s Home Address)	
	TCP Investment Fund II, L.P			
	1845 Woodall Rogers Parkw Dallas, TX 75201	<i>r</i> ay		
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	55,000 - \$9,999	\$10,000 - \$24,999 \$25,000-	-OR MORE
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION		NAME AND (check if Filer)	ADDRESS s Home Address)	
	Evergreen Charitable Rema	inder Unitrust		
	109 North Post Oak Lane Suite 540 Houston, TX 77024			
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000-	-OR MORE
Co	OPY AND ATTACH ADDITI	ONAL PAGES AS	NECESSARY	

PART 7B INTERESTS IN BUSINESS ENTITIES □ NOT APPLICABLE Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--**INSTRUCTION GUIDE** When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 HELD OR ACQUIRED BY DEPENDENT CHILD X FILER ☐ SPOUSE NAME AND ADDRESS ² DESCRIPTION (check if Filer's Home Address) David Dewhurst Investment - I, Inc. 109 North Post Oak Lane Suite 540 Houston, TX 77024 3 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE ☐ NET LOSS HELD OR ACQUIRED BY ☐ SPOUSE □ DEPENDENT CHILD X FILER NAME AND ADDRESS DESCRIPTION (check if Filer's Home Address) FSI Management, LLC 109 North Post Oak Lane Suita 540 Houston, TX 77024 IF SOLD □ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE ☐ NET LOSS HELD OR ACQUIRED BY X FILER ☐ SPOUSE DEPENDENT CHILD NAME AND ADDRESS **DESCRIPTION** (check if Filer's Home Address) Falcon Seaboard Investment Pep II, Inc. 109 North Post Oak Lane Suite 540 Houston, TX 77024 IF SOLD ■ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS

TRUST INCOME				PART 9
☐ NOT APPLICABLE				
Identify each source of income rec category of the amount of income than \$500 in income, if the identity	received. Also identify eacl	h asset of the trust f	rom which the benefic	ciary received more
When reporting information about providing the number under which			bout whom you are re	eporting by
¹ SOURCE	David Dewhurst Trust	NAME OF	- TRUST	
² BENEFICIARY	X FILER	SPOUSE	DEPENDENT CHIL	.D
³ INCOME	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
4 ASSETS FROM WHICH OVER \$500 WAS RECEIVED UNKNOWN	Specific Assets & Income	Reported Accordingl	y in Parts 2, 3, 4, 5, 7B	8, 11 A, & 11B.
SOURCE	Evergreen Charitable Ren	NAME O nainder Unitrust	F TRUST	
BENEFICIARY	X FILER	SPOUSE	DEPENDENT CHIL	_D
INCOME	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
ASSETS FROM WHICH OVER \$500 WAS RECEIVED	Specific Assets & Income	Reported According	y in Parts 2, 3, 4, 5, 7E	3, 11A & 11B.
☐ UNKNOWN				
COF	Y AND ATTACH ADDIT	IONAL PAGES AS	NECESSARY	

Austin, Texas 78711-2070

ASSETS OF B	USINESS ASSOC	IATIONS	PART 11A
☐ NOT APPLICABLE			
corporation, professiona dent child held, acquired of the assets. For more When reporting informa	al association, joint venture, or d, or sold 50 percent or more e information, see FORM PFS	r other business assoc of the outstanding own INSTRUCTION GUIE s activity, indicate the c	, limited liability partnership, professional lation in which you, your spouse, or a depenership and indicate the category of the amount DE. hild about whom you are reporting by
¹ BUSINESS ASSOCIATION	FSI Management, LLC 109 North Post Oak Lane Suite 540	NAME AND ADDRESS	(Check if Filer's Home Address)
² BUSINESS TYPE	Houston, TX 77024 Corporation		
3 HELD, ACQUIRED, OR SOLD BY	X FILER	☐ SPOUSE	DEPENDENT CHILD
4 ASSETS	DESCRI None	PTION	CATEGORY X LESS THAN \$5,000

Austin, Texas 78711-2070

USINESS ASSO	CIATIONS		PART 11A
Ξ			
al association, joint venture d, or sold 50 percent or mo e information, see FORM Pl tion about a dependent chi	or other business assoc re of the outstanding owr FSINSTRUCTION GUII Id's activity, indicate the o	ciation in which you, your spo nership and indicate the categ DE.	use, or a depen- gory of the amount
Evergreen Charitable Rem 109 North Post Oak Lane Suite 540 Houston, TX 77024	NAME AND ADDRESS nainder Unitrust	(Check if Filer's Home Address)
Trust			
X FILER	SPOUSE	DEPENDENT CHILD)
None	CRIPTION	î	EGORY \$5,000 - \$9,999 \$25,000OR MORE
	ach coporation, firm, partneral association, joint ventured, or sold 50 percent or more information, see FORM Potion about a dependent chinder which the child is liste Evergreen Charitable Ren 109 North Post Oak Lane Suite 540 Houston, TX 77024 Trust X FILER DES	ach coporation, firm, partnership, limited partnership al association, joint venture, or other business association, see FORM PFSINSTRUCTION GUINTION about a dependent child's activity, indicate the noder which the child is listed on the Cover Sheet. NAME AND ADDRESS Evergreen Charitable Remainder Unitrust 109 North Post Oak Lane Suite 540 Houston, TX 77024 Trust Image: Image	ach coporation, firm, partnership, limited partnership, limited liability partnership, al association, joint venture, or other business association in which you, your spond, or sold 50 percent or more of the outstanding ownership and indicate the categor information, see FORM PFSINSTRUCTION GUIDE. Intion about a dependent child's activity, indicate the child about whom you are repender which the child is listed on the Cover Sheet. NAME AND ADDRESS (Check if Filer's Home Address)

PART 11A ASSETS OF BUSINESS ASSOCIATIONS □ NOT APPLICABLE Describe all assets of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS (Check if Filer's Home Address) **BUSINESS** Falcon Seaboard Investment Co., L.P. **ASSOCIATION** 109 North Post Oak Lane Suite 540 Houston, TX 77024 Limited Partnership ² BUSINESS TYPE ³ HELD, ACQUIRED, ☐ SPOUSE ☐ DEPENDENT CHILD ___ X FILER OR SOLD BY DESCRIPTION CATEGORY 4 ASSETS Cash LESS THAN \$5,000 \$5,000 - \$9,999 **\$10,000 - \$24,999** X \$25,000--OR MORE Private Equity Investments ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 X \$25,000--OR MORE **\$10,000 - \$24,999 Publicly Held Equities** ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 X \$25,000--OR MORE **\$10,000 - \$24,999** 100% Ownership in Falcon Seaboard Investment - PEP ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 II, Inc. (C-Corp Subsidiary) **\$10,000 - \$24,999** X \$25,000--OR MORE

1-800-325-8506 PART 11A ASSETS OF BUSINESS ASSOCIATIONS ■ NOT APPLICABLE Describe all assets of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. (Check if Filer's Home Address) NAME AND ADDRESS **BUSINESS** David Dewhurst Investment Partnership, Ltd. **ASSOCIATION** 109 North Post Oak Lane Suite 540 Houston, TX 77024 Limited Partnership ² BUSINESS TYPE ³ HELD, ACQUIRED, ☐ SPOUSE □ DEPENDENT CHILD ___ X FILER OR SOLD BY CATEGORY DESCRIPTION 4 ASSETS Cash X LESS THAN \$5,000 \$5,000 - \$9,999 ☐ \$25,000--OR MORE **\$10,000 - \$24,999**

Austin, Texas 78711-2070

PART 11A ASSETS OF BUSINESS ASSOCIATIONS ■ NOT APPLICABLE Describe all assets of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. (Check if Filer's Home Address) NAME AND ADDRESS ¹ BUSINESS David Dewhurst Investment - I, Inc. **ASSOCIATION** 109 North Post Oak Lane Suite 540 Houston, TX 77024 Corporation ² BUSINESS TYPE ³ HELD, ACQUIRED, X FILER ☐ SPOUSE DEPENDENT CHILD ___ OR SOLD BY CATEGORY DESCRIPTION 4 ASSETS None X LESS THAN \$5,000 \$5,000 - \$9,999 ☐ \$25,000--OR MORE **\$10,000 - \$24,999**

PART 11B LIABILITIES OF BUSINESS ASSOCIATIONS ■ NOT APPLICABLE Describe all liabilities of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the liabilities. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS (Check if Filer's Home Address) **BUSINESS** Falcon Seaboard Diversified, Inc. **ASSOCIATION** 109 North Post Oak Lane Suite 540 Houston, TX 77024 ² BUSINESS TYPE Corporation ³ HELD, ACQUIRED, DEPENDENT CHILD ___ X FILER ☐ SPOUSE OR SOLD BY DESCRIPTION CATEGORY 4 LIABILITIES Accounts Payable & Accrued Liabilities LESS THAN \$5,000 \$5,000 - \$9,999 X \$25,000--OR MORE \$10,000 - \$24,999 Notes Payable ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 X \$25,000--OR MORE **\$10,000 - \$24,999**

Describe all liabilities of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the liabilities. For more information, see FORM PFSINSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 BUSINESS ASSOCIATION David Dewhurst Investment Partnership, Ltd. 109 North Post Oak Lane Suite 540 Houston, TX 77024 2 BUSINESS TYPE 3 HELD, ACQUIRED, OR SOLD BY PILER SPOUSE DEPENDENT CHILD DESCRIPTION CATEGORY LIABILITIES None LESS THAN \$5,000 \$5,000 - \$9,999		P.O. Box 12070	Austin, Texas 78711-2070	(512)463-580	00 1-800-325-8506
Describe all liabilities of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the liabilities. For more information, see FORM PFSINSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 BUSINESS ASSOCIATION David Dewhurst Investment Partnership, Ltd. 109 North Post Oak Lane Suite 540 Houston, TX 77024 2 BUSINESS TYPE 3 HELD, ACQUIRED, OR SOLD BY DESCRIPTION DESCRIPTION CATEGORY None Cleck if Filer's Home Address Dependent CHILD Dependent CHILD Description Category S5,000 - \$9,998	LIABILITIES C	F BUSINESS	SASSOCIATIONS	5	PART 11B
corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the liabilities. For more information, see FORM PFSINSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 BUSINESS ASSOCIATION David Dewhurst Investment Partnership, Ltd. 109 North Post Oak Lane Suite 540 Houston, TX 77024 2 BUSINESS TYPE 3 HELD, ACQUIRED, OR SOLD BY FILER SPOUSE DEPENDENT CHILD CATEGORY None CATEGORY None LESS THAN \$5,000 \$5,000 - \$9,999	☐ NOT APPLICABLE	=			
David Dewhurst Investment Partnership, Ltd. 109 North Post Oak Lane Suite 540 Houston, TX 77024 BUSINESS TYPE 3 HELD, ACQUIRED, OR SOLD BY 4 LIABILITIES Description Category None X Less THAN \$5,000 \$5,000 - \$9,999	corporation, professions dent child held, acquired of the liabilities. For mo When reporting informa	al association, joint ve d, or sold 50 percent or ore information, see Fortion about a depende	enture, or other business as or more of the outstanding of ORM PFSINSTRUCTION ent child's activity, indicate the	sociation in which you, your spou ownership and indicate the catego GUIDE. ne child about whom you are repo	se, or a depen- ory of the amount
Suite 540 Houston, TX 77024 2 BUSINESS TYPE 3 HELD, ACQUIRED, OR SOLD BY 4 LIABILITIES DESCRIPTION None DESCRIPTION None Spouse Dependent Child Category Category X LESS THAN \$5,000 \$5,000 - \$9,999		David Dewhurst Inve		(Check if Filer's Home Address)	
3 HELD, ACQUIRED, OR SOLD BY 4 LIABILITIES DESCRIPTION None DESCRIPTION DESCRIPTION CATEGORY X LESS THAN \$5,000 \$5,000 - \$9,999		Suite 540			20,000
OR SOLD BY 4 LIABILITIES DESCRIPTION CATEGORY X LESS THAN \$5,000 \$5,000 - \$9,999	² BUSINESS TYPE				
4 LIABILITIES DESCRIPTION None CATEGORY X LESS THAN \$5,000 \$5,000 - \$9,999	3 HELD, ACQUIRED, OR SOLD BY	X F	ILER SPOUS	SE DEPENDENT CHILD	
	4 LIABILITIES	None	DESCRIPTION	▼ LESS THAN \$5,000	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Ethics Commission	P.O. Box 12070	Austin, Texas 7	8711-2070	(512)463-58	00 1-800-325-8506
LIABILITIES C	F BUSINESS	ASSOCI	ATIONS		PART 11B
☐ NOT APPLICABLE	=				
corporation, professions dent child held, acquire of the liabilities. For mo	al association, joint ve d, or sold 50 percent c ore information, see FO tion about a depender	nture, or other bor or more of the ou DRM PFSINST of child's activity listed on the Co	usiness associal utstanding owner RUCTION GUID , indicate the chi over Sheet.	ld about whom you are repo	ise, or a depen- ory of the amount
¹ BUSINESS ASSOCIATION	David Dewhurst Inve	stments - I, Inc.	ID ADDRESS	(Check if Filer's Home Address)	
	Suite 540 Houston, TX 77024	Lane			
² BUSINESS TYPE	Corporation				
³ HELD, ACQUIRED, OR SOLD BY	X FII	LER	SPOUSE	DEPENDENT CHILD	
4 LIABILITIES		DESCRIPTION		CATE	EGORY
LIABILITIES	None			X LESS THAN \$5,000	\$5,000 - \$9,999
				— 	☐ \$25,000OR MORE
	COPY AND A	TTACH ADDIT	ONAL PAGES	AS NECESSARY	

LIABILITIES O	F BUSINESS ASSOCIATIONS	PART 11B
☐ NOT APPLICABLE		
corporation, professiona dent child held, acquired of the liabilities. For mor When reporting informat	each coporation, firm, partnership, limited partnership lassociation, joint venture, or other business associated, or sold 50 percent or more of the outstanding owner information, see FORM PFSINSTRUCTION GUID ion about a dependent child's activity, indicate the childer which the child is listed on the Cover Sheet.	ion in which you, your spouse, or a depen- ship and indicate the category of the amount DE.
¹ BUSINESS ASSOCIATION	NAME AND ADDRESS FSI Management, LLC 109 North Post Oak Lane Suite 540 Houston, TX 77024	(Check if Filer's Home Address)
² BUSINESS TYPE	Corporation	
³ HELD, ACQUIRED, OR SOLD BY	∏ FILER	DEPENDENT CHILD
4 LIABILITIES	DESCRIPTION None	CATEGORY X LESS THAN \$5,000

Texas Ethics Commission

LIABILITIES O	F BUSINESS ASSOCIA	ATIONS		PART 11B
☐ NOT APPLICABLE				
corporation, professiona dent child held, acquired of the liabilities. For mon When reporting informat	each coporation, firm, partnership, lin I association, joint venture, or other bl, or sold 50 percent or more of the our information, see FORM PFSINST ion about a dependent child's activity der which the child is listed on the Co	usiness association utstanding ownershi FRUCTION GUIDE. r, indicate the child a	n in which you, your spot ip and indicate the categ	use, or a depen- lory of the amount
¹ BUSINESS ASSOCIATION	NAME AN Evergreen Charitable Remainder Unit 109 North Post Oak Lane Suite 540 Houston, TX 77024	_	(Check if Filer's Home Address)	
² BUSINESS TYPE	Trust			
³ HELD, ACQUIRED, OR SOLD BY	☑ FILER	SPOUSE	DEPENDENT CHILD	
⁴ LIABILITIES	DESCRIPTION None		CATI LESS THAN \$5,000 1 \$10,000 - \$24,999	EGORY \$5,000 - \$9,999 \$25,000OR MORE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Austin, Texas 78711-2070

LIABILITIES O	F BUSINESS ASSOCI	ATIONS	PART 11B
☐ NOT APPLICABLE			
corporation, professiona dent child held, acquired of the liabilities. For mo When reporting informat	Il association, joint venture, or other in the solution of the of the of the of the office information, see FORM PFSINS	business associa outstanding owne TRUCTION GUI y, indicate the ch	p, limited liability partnership, professional ation in which you, your spouse, or a depenership and indicate the category of the amount IDE. IDE. Inild about whom you are reporting by
¹ BUSINESS ASSOCIATION	NAME A Falcon Seaboard Investment Co., L.I 109 North Post Oak Lane Suite 540 Houston, TX 77024	AND ADDRESS P.	(Check if Filer's Home Address)
² BUSINESS TYPE	Limited Partnership		
³ HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD
⁴ LIABILITIES	DESCRIPTION None		CATEGORY X LESS THAN \$5,000

Austin, Texas 78711-2070

PART 12 BOARDS AND EXECUTIVE POSITIONS □ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. **David Dewhurst Foundation** ORGANIZATION 1 Trustee ² POSTITION HELD 3 POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD _____ American Quarter Horse Assocation **ORGANIZATION** Honorary Vice President **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE DEPENDENT CHILD __ Jewish Institute For National Security Affairs **ORGANIZATION** Vice President - Leadership Group **POSTITION HELD** POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD _____ Foundation Board of the Bob Bullock Texas State History Museum **ORGANIZATION** Member, Board of Trustees **POSTITION HELD POSITION HELD BY** X SPOUSE DEPENDENT CHILD FILER Texas Cultural Trust Council ORGANIZATION Member, Board of Directors **POSTITION HELD** POSITION HELD BY X SPOUSE DEPENDENT CHILD _____ FILER

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506 **PART 12** BOARDS AND EXECUTIVE POSITIONS ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Health Museum in Houston ORGANIZATION 1 Member, Board of Directors ² POSTITION HELD ³ POSITION HELD BY X SPOUSE DEPENDENT CHILD _____ FILER Friends of Nursing Board of St. Luke's Hospital **ORGANIZATION** Member, Board of Directors **POSTITION HELD POSITION HELD BY** ☐ FILER X SPOUSE □ DEPENDENT CHILD ___ MD Anderson Board of Visitors **ORGANIZATION** Associate Member, Board of Directors POSTITION HELD POSITION HELD BY FILER X SPOUSE DEPENDENT CHILD _____ Association Of Women In Energy **ORGANIZATION** Member, Board of Directors **POSTITION HELD POSITION HELD BY** X SPOUSE DEPENDENT CHILD FILER Texas Children's Leadership Cabinet **ORGANIZATION** Member, Advisory Board **POSTITION HELD** POSITION HELD BY FILER X SPOUSE DEPENDENT CHILD _____

Texas Ethics Commission	P.O. Box 12070	Austin, Texas 78711-2070	(512)463-5800	1-800-325-850
TEXAS ETHICS COMMISSION	F.O. DOX 12070	Austili, Texas 101 11-2010	(312)400-0000	1 000 020 000

BOARDS AND EXE	CUTIVE POSIT	TIONS		PART 12
☐ NOT APPLICABLE				= = = -
List all boards of directors of wh your spouse, or a dependent ch ships, professional corporations stating the name of the organiza	ild hold in corporations, f , professional association	firms, partnerships, lim ns, joint ventures, othe	ited partnerships, limited liabil er business associations, or pr	ity partner- oprietorships,
When reporting information abo providing the number under whi			d about whom you are reportir	ig by
¹ ORGANIZATION	Nau Center for Texas Cu	ultural Heritage		
² POSTITION HELD	Member, Capital Campa	ign Committee		
³ POSITION HELD BY	☐ FILER	X SPOUSE	DEPENDENT CHILD	
Ce	OPY AND ATTACH AD	DITIONAL PAGES	AS NECESSARY	

PERSONAL FINANCIAL STATEMENT

PARTS MARKED 'NOT APPLICABLE' BY FILER

Rather than printing a page for each Part the filer checked 'Not Applicable,' this page summarizes whether the 'Not Applicable' checkbox was checked for each Part. If the checkbox is checked next to a Part below, then no pages for that Part should be present in the report. If a checkbox is not checked, then pages for that Part should be present in the report.

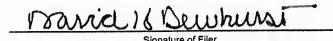
Austin, Texas 78711-2070

☐ N/A Part 1A - Sources of Occupational Income
☑ N/A Part 1B - Retainers
□ N/A Part 2 - Stock
☐ N/A Part 3 - Bonds, Notes & Other Commercial Paper
☐ N/A Part 4 - Mutual Funds
☐ N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
☐ N/A Part 6 - Personal Notes and Lease Agreements
□ N/A Part 7A - Interests in Real Property
□ N/A Part 7B - Interests in Business Entities
☑ N/A Part 8 - Gifts
□ N/A Part 9 - Trust Income
☑ N/A Part 10A - Blind Trusts
☑ N/A Part 10B - Trustee Statement
☐ N/A Part 11A - Assets of Business Associations
☐ N/A Part 11B - Liabilities of Business Associations
☐ N/A Part 12 - Boards and Executive Positions
☑ N/A Part 13 - Expenses Accepted Under Honorarium Exception
☑ N/A Part 14 - Interest in Business in Common with Lobbyist
☑ N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
☑ N/A Part 16 - Representation by Legislator Before State Agency
☑ N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
☑ N/A Part 18 - Legislative Continuances

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verfied. The verfication page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, **2013**, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.





AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by David Dewhurst this the 15 day of January, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed na

Printed name of officer administering cath

le of officer administering ceth